12 2005 ST	this form, together'wi		or <u>Fax</u>	Commissioner: P.O. Box 1450 Alexandria, Vii (703) 746-4000	for Patents rginia 22313-1450	
INSTRUCTIONS/ This f appropriate with further confidence this sourceted maintenance fee notification	form should be used for train orrespondence including the below or directed otherwise ons.	nsmitting the ISSU Patent, advance or in Block 1, by (a	E FEE and PUE ders and notificat) specifying a ne	LICATION FEE (if recion of maintenance fees w correspondence address	uired). Blocks 1 through 5 s will be mailed to the current ss; and/or (b) indicating a sep	should be completed when t correspondence address arate "FEE ADDRESS" to arate "FEE ADDRESS" to
	NCE ADDRESS (Note: Use Block I fo	r any change of address)		Note: A certificate of	of mailing can only be used f	or domestic mailings of
2352	7590 05/12/2005			papers. Each additio	nal paper, such as an assignm ate of mailing or transmission.	ent or formal drawing, m
	FABER GERB & SO	FFFN			•	
	OF THE AMERICAS	I I LIV		I hereby certify that	ertificate of Mailing or Tran this Fee(s) Transmittal is bein	ig deposited with the Uni
NEW YORK, NY				addressed to the M	this Fee(s) Transmittal is being with sufficient postage for fit ail Stop ISSUE FEE address SPTO (703) 746-4000, on the	rst class mail in an envelo s above, or being facsin
/2005 HDESTA2 00000	0046 09723655			transmitted to the US	SPTO (703) 746-4000, on the	
1501 1400.00 OP						(Depositor's nar
:8001 · 30.00 0				TOO WA	J hwan	(Signatu
						(Da
APPLICATION NO.	FILING DATE	1	FIRST NAMED IN	/ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/723,655	11/28/2000		Thomas Her	man	IR-1986 DIV (2-2500)	6611
nonprovisional	·		· · · · · · · · · · · · · · · · · · ·	\$0	\$1400	08/12/2005
EXAMINER		ART UNIT C		CLASS-SUBCLASS	J	
RICHARI	DS, N DREW	2815		438-306000		
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
. ASSIGNEE NAME AN	D RESIDENCE DATA TO E	BE PRINTED ON T	HE PATENT (pr	nt or type)		
PLEASE NOTE: Unles recordation as set forth i				on the patent. If an assigning an assignment. CITY and STATE OR CO	gnee is identified below, the opening of the openin	locument has been filed
INTERNA	TIONAL RECTI	FIER CORP	PORATION		EGUNDO, CALIFO	
	te assignee category or catego		<u>`</u>	<u> </u>	Corporation or other private gr	oup entity Governm
 a. The following fee(s) are Issue Fee 	e enclosed:		. Payment of Fee(s): amount of the fee(s) is e	analogad	
	small entity discount permitte			e amount of the fee(s) is a redit card. Form PTO-20.		•
	of Copies				charge the required fee(s), or (enclose an extra c	credit any overpayment.
			Deposit Account	Number	(enclose an èxtra c	copy of this form).
	s (from status indicated above SMALL ENTITY status. See		D. Applicant i	s no longer claiming SM	ALL ENTITY status. See 37 C	FR 1.27(g)(2)
					sly paid issue fee to the applications gistered attorney or agent; or t	
Authorized Signature	Sam	Her	<u>`</u>	Date		
Typed or printed name				Registratio	on No	
•• •	ion is required by 37 CFR 1.3 lity is governed by 35 U.S.C upplication form to the USPT is for reducing this burden, sl ginia 22313-1450. DO NOT	11. The information 122 and 37 CFR 1	n is required to ob			

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.